

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007542

**Entity Name:** ECCLESIASTICAL PROVINCE OF MIAMI, INC.

**Current Principal Place of Business:**

9401 BISCAYNE BOULEVARD  
MIAMI SHORES, FL 33138

**Current Mailing Address:**

9401 BISCAYNE BOULEVARD  
MIAMI SHORES, FL 33138 US

**FEI Number:** 03-0531040

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

J. PATRICK FITZGERALD, ESQUIRE  
J. PATRICK FITZGERALD & ASSOCIATES, P.A.  
110 MERRICK WAY, SUITE 3-B  
CORAL GABLES, FL 33134 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT

Name MCPARTLAND, PETER

Address 1000 PINEBROOK ROAD

City-State-Zip: VENICE FL 34285

Title DIRECTOR, TREASURER

Name CASEY, KEVIN

Address 50 EAST ROBINSON

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR, VP

Name BELL, STEPHEN

Address 11625 OLD ST. AUGUSTINE ROAD

City-State-Zip: JACKSONVILLE FL 32258

Title DIRECTOR, SECRETARY

Name KIMBELL, DAVID

Address 11 NORTH B ST

City-State-Zip: PENSACOLA FL 32502

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PETER MCPARTLAND

**PRESIDENT**

**03/21/2025**

Electronic Signature of Signing Officer/Director Detail

Date